

**Application REACH Late Pre-registration**

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| 1. **Identity of Manufacturer/Importer/Exporter:** | | | | |
| Company Name |  | | VAT number |  |
| Address |  | | | |
| Contact person | Name | |  | |
| Phone/Fax | |  | |
| Email | |  | |
| 1. **Identification of Substance** | | | | |
| Substance Name | CAS number | Annual Tonnage Exported to EU | | Date of exceeding 1 t/a limit |
|  |  |  | |  |
| 1. **Statement** | | | | |
| I guarantee that above information provided is accurate.  Applicant: Signature: Date: | | | | |

Please return this application form to [louise@cirs-reach.com](mailto:louise@cirs-reach.com) or [morgan@cirs-reach.com](mailto:morgan@cirs-reach.com). If you have any questions regarding this service please do not hesitate to contact us.